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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

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Application Number	09/350,401
Filing Date	July 8, 1999
First Named Inventor	SETTE, Alessandro, et al.
Group Art Unit	1644
Examiner Name	R. Schwadron
Attorney Docket Number	18623013910

Total Number of Pages in This Submission

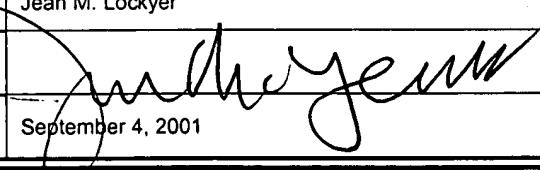
ENCLOSURES (check all that apply)

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<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request – 1 mo. per accompanying Fee Transmittal
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)
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Remarks

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Firm and Individual name	Townsend and Townsend and Crew LLP Jean M. Lockyer	Reg No. 44,879
Signature		
Date	September 4, 2001	

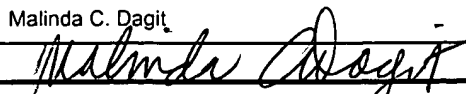
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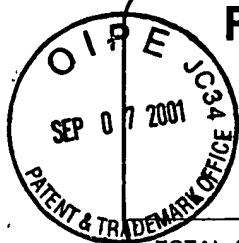
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

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TOTAL AMOUNT OF PAYMENT (\$) 55

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METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																																																																																																																		
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a brief in support of reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td>55</td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td>695</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td>945</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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2. EXTRA CLAIM FEES <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>-20**</td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>-3**</td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td>X</td> <td></td> <td></td> </tr> </tbody> </table> 103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims over original patent 110 18 210 9 ** Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$)					Total Claims	Extra Claims	Fee from below	Fee Paid	-20**	X			-3**	X			Multiple Dependent	X																																																																																																																																																																					
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Jean M. Lockyer	Registration No. (Attorney/Agent)	44,879
Signature		Telephone	415-576-0200
		Date	September 4, 2001

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